

PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL

D. O. Vou. No. _____
Bu. Vou. No. 2012

U. S. COST REIMBURSABLE

(Department, bureau, or establishment)

Voucher prepared at _____

(Give place and date)

THE UNITED STATES, Dr.,

Payee's Account No. _____

To _____

(Payee)

PAID BY
Chk # 35
SAPC 23666
COPY 1 OF 2

(Address)

(City)

(State)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Cost				558.	13

PAYMENT:

Complete ☐
Partial ☐
Final ☐

Use continuation sheet(s) if necessary

Shipped from _____ to _____ Weight _____ Government B/L No. _____ Total 558.13

I certify that the above bill is correct and just and that payment has not been received.

(Payee must NOT use this space)

(Sign original only)

STATINTL

Date 1/14/58 *Payee

(Note not required when a like certificate is made by payee on attached bill or bills)

Per _____ Title _____

Amount verified; correct for _____

(Signature or initials)

Contract No. A-101 Date _____ Req. No. _____ Date _____ Invoice Rec'd.

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

† Approved for \$ _____

† _____
(Authorized Certifying Officer)

By _____

SIGN
ORIGINAL
ONLY

Title _____

Title _____ Date _____

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. _____ dated _____, 19____, for \$ _____ (on Treasurer of the United States in favor of payee named above.)
Cash, \$ _____, on _____, 19____. Payee _____

(Sign original only)

* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he is acting, must be shown. For example, "John Doe Company, per _____ Secretary or Treasurer, the case may be."
† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

Title _____

Public Voucher for Purchases and
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CONTINUATION SHEET

U. S. COST REIMBURSABLE Sheet No. 1 of Bureau Voucher No. 2015
(Department, bureau, or establishment)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Contract <u>A-101</u> System IV Direct Costs Properly Chargeable to Contract <u>A-101</u> for the period 12/23 thru 12/31/57 STATINTL Research & Development					
		Labor for the period 12/23 thru 12/31/57 JV 127060 STATINTL					
		Other Costs - per schedule attached (214.20) JV 127060 JV 127065					
		Total Labor and Other Costs					
		G & A expense computed at interim rate of					
		STATINTL					
		Total Costs				\$ 558.13	

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BATCH NO DATE	TICKET INVOICE CR MEMO	CHECK NO	PAYEE NAME OR VENDOR NO	TR CODE	COST CNTR	ACCT	MJO	DATE 12/31/57 SO W O	DISTR AMT
41 12 27 7	DM-1296	1178	26	50	254000	12501	5043	03 1	214.20- 214.20-*
									214.20-**
								<i>Total</i>	<u>214.20-***</u>

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